

- In 2022, pain physicians wrote 4,746,372 short-term opioid prescriptions totaling \$316,052,876 and 778,219 long-term opioid prescriptions totaling \$185,520,013 for Medicare Part D beneficiaries.
- Among 3,900 pain physicians, 5.15% prescribed no opioids, 17.69% prescribed 11-100, 26.59% prescribed 101-500, 16.56% prescribed 501-1000, 29.28% prescribed 1000-5000, and 4.72% prescribed over 5000.

- Men had significantly higher total opioid claims and prescriber rates than women ($p < 0.001$)

- The South showed significantly higher total claims, prescriber rates, claims per beneficiary, and days per claim ($p < 0.001$).
- The South had higher total claims, days per claim, and claims per beneficiary for morphine, hydrocodone-acetaminophen, oxycodone-acetaminophen, oxycodone, hydromorphone, & tramadol ($p < 0.001$).
- The states with the highest proportion of physicians prescribing 1000+ opioids were Alabama (70.21%), Kentucky (67.14%), Louisiana (62.35%), Georgia (61.07%), & Arkansas (59.46%)

- No significant differences were found between metropolitan, micropolitan, and rural areas.

- Overall, male pain management physicians prescribed more opioids than females, and the South had disparately higher opioid prescribing practices than other regions of the USA.
- Trends may be attributed to varying emphasis on alternative pain management methods or socioeconomic factors influencing pain management therapies.
- Results show similar patterns to 2019 Medicare Part D data
- Understanding trends can provide insights that can help reduce the role of pain physicians in the opioid epidemic and inform public health policies to lower opioid-related mortality and morbidity.

Table 1. Opioid Claims and Prescriber Rates By Demographics		N	Median Total Opioid Claims	Median Prescriber Rate	Median Days per Claim	Median Claims per Beneficiary
Gender	Male	3332	562.5*	49.28*	26.93	4.38
	Female	568	306.5	42.03	26.85	4.19
Region	Northeast	38	26.89	38.33	25.57	3.77
	South	1750	977*	54.41*	27.69*	5.02*
	Midwest	728	296	45.21	26.14	3.73
	West	763	348	44.44	26.43	3.69
RUCA	Metropolitan	3553	503	48.32	26.89	4.36
	Micropolitan	194	558	48.49	27.41	4.26
	Rural/Smalltown	38	587	46.82	26.89	4.11

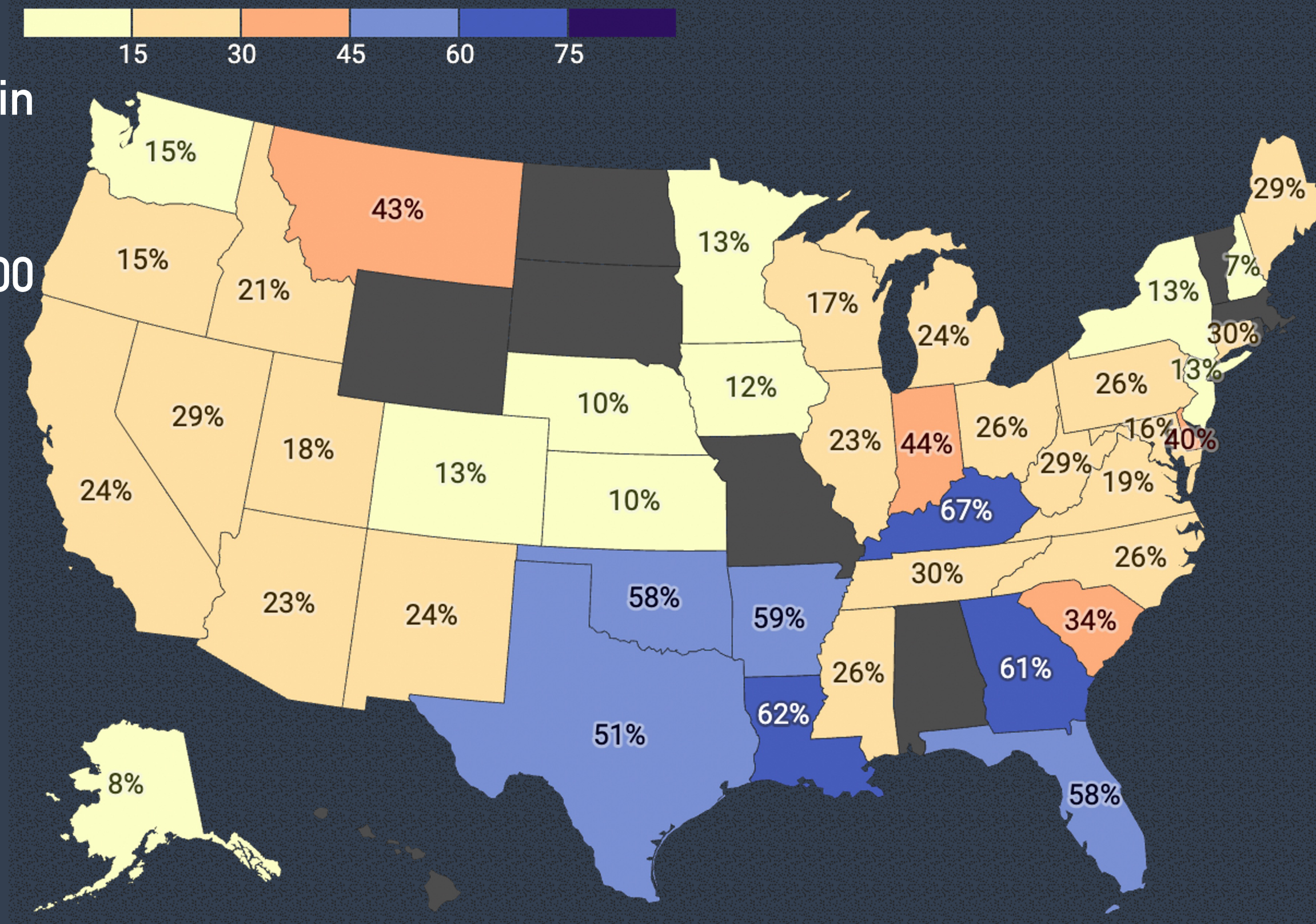
Table 2. Number of Opioid Claims by Opioid Type

Opioid	<10 claims	10-100 claims	100-500 claims	>500 claims
Morphine	0	1281	143	4
Hydrocodone-Acetaminophen	0	1262	1223	964
Oxycodone-Acetaminophen	0	1535	1190	608
Oxycodone	0	1504	1043	262
Oxymorphone	0	140	0	0
Hydromorphone	0	1201	248	7
Tramadol	0	2525	1190	143

Table 3. Median Opioid Claims by Opioid Type

Opioid	Median Total Claims (Q1-Q3)	Median Days per Claim (Q1-Q3)	Median Claims per Beneficiary (Q1-Q3)
Morphine	28 (17-53)	28.39 (26.57-29.50)	4.23 (2.91-6.4)
Hydrocodone-Acetaminophen	176 (57-576)	27.45 (24.95-28.81)	3.89 (2.40-5.91)
Oxycodone-Acetaminophen	118 (38-344)	27.86 (25.70-29.01)	4.21 (2.55-6.45)
Oxycodone	87 (32-225)	27.98 (26.09-29.09)	4.50 (2.71-7.14)
Oxymorphone	14 (12-21)	28.65 (27.34-30.00)	2.80 (2.40-4.20)
Hydromorphone	35 (19-76)	27.31 (24.69-28.80)	4.20 (2.80-6.28)
Tramadol	61 (26-143)	26.5 (23.50-28.44)	3.20 (2.37-4.47)

Figure 1.
Percentage of pain management physicians prescribing > 1000 opioids to Medicare Part D beneficiaries in 2022 by State



REFERENCES

U.S. Department of Health and Human Services (2019, May). Pain Management Best Practices Inter-Agency Task Force Report: Updates, Gaps, Inconsistencies, and Recommendations. Retrieved from U. S. Department of Health and Human Services website: <https://www.hhs.gov/ash/advisory-committees/pain/reports/index.html>

Guy GP Jr, Zhang K, Bohm MK, Losby J, Lewis B, Young R, Murphy LB, Dowell D. Vital Signs: Changes in Opioid Prescribing in the United States, 2006–2015. *MMWR Morb Mortal Wkly Rep.* 2017 Jul 7;66(26):697–704. doi: 10.15585/mmwr.mm6626a4.